

REVOCAION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/782529	
	Filing Date	February 18, 2004	
	First Named Inventor	CHAUDHAN	
	Art Unit	2141	
	Examiner Name	Not yet assigned	
	Attorney Docket Number	2006579-0554 (CTX-161)	

I hereby revoke all previous powers of attorney given in the above-identified application.			
<input type="checkbox"/> A Power of Attorney is submitted herewith. OR <input checked="" type="checkbox"/> I hereby appoint the practitioners associated with the Customer Number: 69665			
<input checked="" type="checkbox"/> Please change the correspondence address for the above-identified application to: <input checked="" type="checkbox"/> The address associated with Customer Number: 69665			
OR			
<input type="checkbox"/> Firm or Individual Name	Teros, Inc.		
Address	c/o Citrix Systems, Inc. Silicon Valley 4988 Great America Parkway		
City	Santa Clara	State	CA
Country	United States		
Telephone	Email		
I am the: <input type="checkbox"/> Applicant/Inventor. <input checked="" type="checkbox"/> Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)			
SIGNATURE of Applicant or Assignee of Record			
Signature			
Name	David R. Friedman, Secretary of Teros, Inc.		
Date	4/23/07	Telephone	954-267-2392
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below".			
<input checked="" type="checkbox"/> Total of 1 forms are submitted.			

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